

SCC eFile	2012 ANNUAL REPORT COMMONWEALTH OF VIRGINIA STATE CORPORATION COMMISSION	212542693				
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <p>1.) CORPORATION NAME: PREMIER, INC. OF DELAWARE (USED IN VA BY:PREMIER, INC.)</p> <p>2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: CT CORPORATION SYSTEM 4701 COX RD STE 301 GLEN ALLEN, VA 23060-6802</p> <p>3.) CITY OR COUNTY OF VA REGISTERED OFFICE: HENRICO COUNTY</p> <p>4.) STATE OR COUNTRY OF INCORPORATION: DE</p> </div> <div style="width: 35%;"> <p>DUE DATE: 9/30/2012</p> <p>SCC ID NO: F1395237</p> <p>5.) STOCK INFORMATION</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="width: 50%;">CLASS</th> <th style="width: 50%;">AUTHORIZED</th> </tr> <tr> <td>COMMON</td> <td>12,250,000</td> </tr> </table> </div> </div>			CLASS	AUTHORIZED	COMMON	12,250,000
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COMMON	12,250,000					
<p>6.) PRINCIPAL OFFICE ADDRESS:</p> <p style="text-align: center;">ADDRESS: 13034 BALLANTYNE CORPORATE PL.</p> <p style="text-align: center;">CITY/ST/ZIP: CHARLOTTE, NC 28277</p>						
<p>7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.</p>						
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; vertical-align: top;"> NAME: SUSAN D DEVORE TITLE: CEO & PRESIDENT ADDRESS: 13034 BALLANTYNE CORPORATE PL. CITY/ST/ZIP/CO: CHARLOTTE, NC 28277 </td> <td style="width: 10%; text-align: center; vertical-align: top;"> <input checked="" type="checkbox"/> OFFICER </td> <td style="width: 40%; text-align: center; vertical-align: top;"> <input checked="" type="checkbox"/> DIRECTOR </td> </tr> </table>			NAME: SUSAN D DEVORE TITLE: CEO & PRESIDENT ADDRESS: 13034 BALLANTYNE CORPORATE PL. CITY/ST/ZIP/CO: CHARLOTTE, NC 28277	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR	
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<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; vertical-align: top;"> NAME: ANNA-MARIE FORREST TITLE: SECRETARY ADDRESS: 13034 BALLANTYNE CORPORATE PL. CITY/ST/ZIP/CO: CHARLOTTE, NC 28277 </td> <td style="width: 10%; text-align: center; vertical-align: top;"> <input checked="" type="checkbox"/> OFFICER </td> <td style="width: 40%; text-align: center; vertical-align: top;"> <input type="checkbox"/> DIRECTOR </td> </tr> </table>			NAME: ANNA-MARIE FORREST TITLE: SECRETARY ADDRESS: 13034 BALLANTYNE CORPORATE PL. CITY/ST/ZIP/CO: CHARLOTTE, NC 28277	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR	
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NAME: Keith Pitts TITLE: DIRECTOR ADDRESS: 13034 BALLANTYNE CORPORATE PL. CITY/ST/ZIP/CO: CHARLOTTE, NC 28277	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR				

NAME:	GLENN STEELE, JR. , MD	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	CHAIRMAN		
ADDRESS:	13034 BALLANTYNE CORPORATE PL.		
CITY/ST/ZIP/CO:	CHARLOTTE, NC 28277		
NAME:	MICHAEL ALKIRE	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	COO		
ADDRESS:	13034 BALLANTYNE CORPORATE PL.		
CITY/ST/ZIP/CO:	CHARLOTTE, NC 28277		
NAME:	CHRISTINE CASSEL, MD	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	13034 BALLANTYNE CORPORATE PL.		
CITY/ST/ZIP/CO:	CHARLOTTE, NC 28277		
NAME:	CHARLES HART, MD	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	13034 BALLANTYNE CORPORATE PL.		
CITY/ST/ZIP/CO:	CHARLOTTE, NC 28277		
NAME:	Tomi Ryba	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	13034 BALLANTYNE CORPORATE PL.		
CITY/ST/ZIP/CO:	CHARLOTTE, NC 28277		
NAME:	ROBERT ISSAI	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	13034 BALLANTYNE CORPORATE PL.		
CITY/ST/ZIP/CO:	CHARLOTTE, NC 28277		
NAME:	J. THOMAS JONES	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	13034 BALLANTYNE CORPORATE PL.		
CITY/ST/ZIP/CO:	CHARLOTTE, NC 28277		
NAME:	WILLIAM MAYER	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	13034 BALLANTYNE CORPORATE PL.		
CITY/ST/ZIP/CO:	CHARLOTTE, NC 28277		
NAME:	RICHARD STATUTO	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	13034 BALLANTYNE CORPORATE PL.		
CITY/ST/ZIP/CO:	CHARLOTTE, NC 28277		
NAME:	THOMAS STRAUSS	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	13034 BALLANTYNE CORPORATE PL.		
CITY/ST/ZIP/CO:	CHARLOTTE, NC 28277		
NAME:	Terry Shaw	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	13034 BALLANTYNE CORPORATE PL.		
CITY/ST/ZIP/CO:	CHARLOTTE, NC 28277		

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	DENNIS VONDERFECHT VICE CHAIRMAN 13034 BALLANTYNE CORPORATE PL. CHARLOTTE, NC 28277	<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	SUSAN WANG DIRECTOR 13034 BALLANTYNE CORPORATE PL. CHARLOTTE, NC 28277	<input type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	ALAN YORDY DIRECTOR 13034 BALLANTYNE CORPORATE PL. CHARLOTTE, NC 28277	<input type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.					
/s/ ANNA-MARIE FORREST SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT		ANNA-MARIE FORREST, SECRETARY PRINTED NAME AND CORPORATE TITLE		11/2/2012 DATE	
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.					